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AUTHOR Friedel, Janice Nahra; Coker, Dana Rosenberg
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ABSTRACT

This document describes and provides forms used in the Eastern Iowa Community College District (EICCD) Vocational-Technical Program Evaluation Process. Chapter I describes development of the process and discusses the goals of program evaluation. Two major components of the program evaluation process--annual program review and 3-year in-depth program evaluation--are identified. Seven components of the in-depth program evaluation process are outlined: program descriptive information; surveys; labor market assessment; faculty self-study; internal review team report; faculty response to report; and decision making by instructional council. Chapters II through VIII focus on these seven components. Each chapter discusses one of the components in detail. Chapter II provides formats to deliver the required program descriptive information. Chapter III contains copies of surveys used with six groups and data matrix formats to present survey results. Types of information collected by the labor market assessment are outlined in Chapter IV. Chapter V presents questions that provide an outline for the faculty self-study. Chapter VI describes the purpose, members, and role of the internal review team and lists its duties. An internal review team report form is provided. Chapters VII and VIII briefly discuss the faculty response to the report and decision making by the instructional council, respectively. (YLB)

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EASTERN IOWA COMMUNITY COLLEGE DISTRICT

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The EICCD Program Evaluation Process for Vocational-Technical Programs: A Summary

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H R Coker

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Authors:

Dr. Janice Nahra Friedel
Associate Vice Chancellor
for Academic Affairs & Planning

Dr. Dana Rosenberg Coker
Institutional Research Manager

CE 059017

The Eastern Iowa Community College District
306 West River Drive, Davenport, Iowa 52801-1221

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ABSTRACT

In 1985, the EICCD completed the development of its Vocational-Technical Program Evaluation Process. The eighteen-month development phase included a review of pertinent research and literature, an examination of twenty-three operational program evaluation models utilized by both two-year community colleges and four-year colleges and universities; on-site visits to four model sites identified through this examination; a pilot test of the Program Discrete Data (annual review) on both an Arts and Science concentration area and a Vocational-Technical program; and review and approval of the process by the District Instructional and Administrative Councils.

The EICCD Evaluation Process for Vocational-Technical Programs has been utilized by the EICCD to ensure the effective and efficient use of its resources, and instructional quality and curricular relevance. The information garnered from the evaluations is used to assist in program and cost accountability efforts; to provide direction to program/curriculum development and modification; to establish a basis for decision-making regarding facilities utilization, the acquisition of new equipment and materials, and faculty development activities.

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CHAPTER I

INTRODUCTION

Development of the Process

The EICCD initiated its investigation and development of a comprehensive Program Evaluation Process in 1983. A Program Improvement Task Force was formed, comprised of both Arts and Science and Vocational-Technical program faculty, and Academic and Student Services administrators. The eighteen-month development phase included a review of pertinent research and literature; an examination of twenty-three operational program evaluation models utilized by both two-year community and technical colleges and four-year colleges and universities; on-site visits to four model sites identified through this examination; a pilot test of the Program Discrete Data (annual review data) on both an Arts and Science concentration area and a Vocational-Technical program; development of survey instruments and their review by an internal team as well as an external consultant; review of the proposed process by the EICCD Vocational Programs' Advisory Committee; and, review and approval of the process by the District Instructional and Administrative Councils.

The development and pilot testing of the Program Evaluation Process were funded through a Title III Strengthening Institutions Grant. The model was utilized on all of the EICCD's vocational-technical programs during the three year period 1985-88. The process was evaluated for the quality and utility of information provided for decision making. Following this evaluation of the model, three major revisions were made:

1. The surveys conducted as a part of the evaluation process were revised for consistency of information;

2. The data matrix model was developed for presentation of the information obtained across the surveys;

3. The locally conducted labor market assessment was integrated as an essential element of the process as a result of the evaluation.

Program Evaluation: EICCD's Intent and Definition

It is the intent of the EICCD's Mission, Beliefs and Goals, that systematic evaluations of all programs/curricula be conducted to ensure quality and relevance, and the effective and efficient use of resources. Additionally, program evaluation is a cooperative process which utilizes the knowledge and expertise of instructors, administrators, current and former students, employers, and advisory committee members.

The primary goal of program evaluation is program improvement. Program evaluation is our means of ensuring that both the needs of the employers and our students are met. The program evaluation process assesses the viability

of the occupational field, as well as the degree to which program outcomes meet the needs of the market place.

It is intended that program evaluation will also find ways of improving the effectiveness and quality of the program's outcomes, and of increasing the efficiency of the use of resources. Program evaluation is worthwhile in itself, for it initiates the process of self-examination among administrators and faculty, and assists in the formulation and clarification of program goals and objectives.

Internally, program evaluation enables the EICCD to make informed decisions regarding program development, maintenance, modification and elimination, and the allocation of resources. It provides information regarding the job market for program graduates, the success of program graduates, direction for curriculum improvement, and the equipment and materials needed for successful program delivery. Externally, program evaluation will assure students, employers and the community that the EICCD is providing quality education which enables individuals to become academically, occupationally, and socially competent. It communicates to our community our commitment to excellence.

Definition of Program. For purposes of program evaluation, programs are defined as:

1. A cluster of students who have declared a specific college major, and;

2. A cluster of courses offered under the alpha/numeric catalog course labels or with a common pre-defined purpose.

Definition of Program Evaluation. Program evaluation is a systematic process for the collection, analysis and interpretation of data concerning a program and its curriculum. It is utilized for making judgments about the effectiveness of the program and to facilitate improvement of the program.

Purposes of Program Evaluation. The primary purpose of program evaluation is to develop a decision support system to:

1. Identify the strengths and weaknesses of the program;

2. Identify the needed curriculum improvements and revisions;

3. Provide data for valid program/curriculum and staff development activities, equipment acquisition, and facilities utilization.

Secondary purposes for program evaluation are many and varied, for it enables the institution to:

1. Compare business and industrial standards with institutional occupational programs standards;

2. Inform former students of the institution's commitment to self improvement and excellence;

3. Inform, involve, and utilize expertise of representatives from business and industries;

4. Identify needed changes or modifications in physical facilities;

5. Identify instructional equipment needs;

6. Identify needs in the learning resources area;

7. Provide data relative to decisions in expenditure of funds;

8. Inform business and industry about the institution and the occupational program;

9. Improve job placement opportunities for students;

10. Identify future occupational trends;

11. Identify any existence of sex bias;

12. Identify unmet needs of disadvantaged and handicapped students.

Pilot Testing and Revision of the Program Evaluation Process

The pilot testing of the EICCD program evaluation process began in 1985. Over the next three years, all of the vocational-technical programs of the EICCD were evaluated using the process; however, program evaluation is not an end in itself. The primary goal of program evaluation is to provide direction to program improvement. The information garnered through the program evaluation process was utilized in the development of the EICCD's vocational-technical programs to a competency-based format, and in making decisions regarding facility requirements/changes, equipment acquisition, and professional development activities for faculty. The subsequent curriculum development was funded principally through the Title III Strengthening Institutions grant.

COMPONENTS OF PROGRAM EVALUATION

The program evaluation process consists of two major components:

1. An annual review of programs;

2. An in-depth program evaluation conducted every three years.

Annual Review of Programs

An Annual Review is conducted of each vocational-technical program. Discrete (statistical) data are collected annually across seven data

elements, and compared over a five-year period. The seven data elements which comprise the Annual Review are:

1. Enrollment/Headcount
2. Contact hours generated by program
3. FTEE generated by program
4. Program graduate/completion rates
5. Program leavers and withdrawals
6. Program cost
7. Success of program leavers and completers--includes job placement and employment status, as well as college transfer information

The annual collection of these data and the five-year trend analysis serves multiple purposes:

1. To identify the well-being of a program.

2. To provide a gauge for indicating the need for program/curriculum revision.

3. To measure the success of the program regarding completion, job placement and performance, and transfer to senior institutions.

4. To ascertain program/department costs, and the factors impacting these costs.

5. To provide a "snapshot" view of the viability of a program.

The "snapshot" obtained from the collection and analysis of the annual discrete data may indicate a need for a more thorough examination of the program. These indicators are reviewed by the Instructional Council in the determination of the schedule for specific programs to be evaluated utilizing the three-year in-depth Program Evaluation Process.

Three-year In-depth Program Evaluation Process

The in-depth program evaluation process is designed to verify the quality and relevance of our vocational-technical offerings. The process provides the faculty and administrators information and perceptions regarding the program from a variety of audiences in order to identify the strengths and weaknesses of the program and to determine means for its improvement. This process consists of seven components:

I. Program Descriptive Information

Program Descriptive Information is provided by the District Office of Academic Affairs and Planning. This includes the five-year comparison of the annually collected data on each vocational-technical program described above as well as the highlights of the Advisory Committee meetings and the

department meetings for the past three years. Other information provided to the faculty the:

- The approved AS-28 program format from the Iowa Department of Education
- The current course development models specific to the program
- Faculty data available through the Management Information Center (MIC)
- Enrollment, graduation, and placement data available in the Program Discrete Data Report
- The current and follow-up student data survey matrix
- Completers' and non-completers' transfer and placement data available from previous surveys
- Data available from year-end CE-4s on program costs and comparison to state averages when available.

These data are utilized by the faculty in completing their self-study and are reviewed by the Internal Review Team members in the completion of their report.

II. Surveys

Essential to the in-depth program evaluation are the results of surveys designed specifically for the purpose of the evaluation. Surveys are conducted of:

1. Current students
2. Graduates of the program from the past three years
3. Part-time faculty in the program
4. Program administrators
5. Advisory Committee members
6. Employers of program graduates

Surveys developed specifically for each target group are sent from and returned to the District Office of Academic Affairs and Planning. All surveys are designed for tabulation and analysis using the Statistical Package for the Social Sciences (SPSS). The results of these surveys are presented in a data matrix format which compares the perceptions of each group on a number of variables. The results of the surveys are provided to the Faculty Self-Study Team and the Internal Review Team.

In addition to the above surveys conducted specifically as a part of the in-depth program evaluation process, the Faculty Self-Study Team and the Internal Review Team are provided a matrix which summarizes data pertinent to the evaluation of the program which are collected through the current (Student Data Questionnaire) and follow-up surveys conducted of students. The matrix compares information pertinent to decision making regarding the specific program from the following surveys:

1. Student Data Questionnaire

2. The Annual Graduate Survey

3. The One-Year Follow-Up Survey (conducted of all students whose last term of attendance was during the previous fiscal year; this includes graduates as well as leavers).

4. The Non-Returning Student Survey (conducted each spring of all students enrolled in the fall who did not re-enroll in classes the following spring semester).

III. Labor Market Assessment

The primary purpose the EICCD's Vocational-Technical programs is to prepare individuals for entry-level jobs in specific occupations. It is imperative that the EICCD have timely and accurate information regarding the job market for program graduates. For this purpose, pertinent information from such sources as the Occupation Information Network (OIN), and Job Service of Iowa are compiled by the District Office of Academic Affairs and Planning and provided to the program Faculty Self-Study Team and to the Internal Review Team. Since information from these reports is based on a limited sample and derived from inadequate collection techniques, the EICCD supplements the information by conducting a local labor market assessment. This assessment may utilize one of two methodologies:

1. A survey mailed to the population (or a sample) of known employers; or

2. Collection of information via focus groups.

The most frequently utilized method by the EICCD is a survey mailed to the employers. Regardless of the strategy for data collection, or the specific program/occupation under review, a core of information is requested. This information is detailed in Chapter 3.

IV. Faculty Self-Study

The Faculty Self-Study Team is provided program descriptive information, including program discrete data, the approved AS-28 program format from the Iowa Department of Education, current course development models, and the results of the local labor market assessment from the District Office of Academic Affairs and Planning. This information is utilized by the Faculty Self-Study Team to complete their report.

The Faculty Self-Study Report provides narrative descriptions regarding the program history, philosophy, curriculum, professional development of faculty, facility utilization and needs, equipment, and occupational outlook. The Self-Study Team identifies strengths and weaknesses of the program, and makes recommendations for program and curriculum improvements. These recommendations may include facility requirements, equipment, staff development activities, etc.

The Faculty Self-Study Team submits its report along with supporting documentation (ie., evaluations, reports, program/department committee minutes, advisory committee minutes, etc.) to the District Office of Academic Affairs and Planning. It is then forwarded to the Internal Review Team and the appropriate dean(s).

V. Internal Review Team Report

The primary purpose of the Internal Review Team is to validate the Faculty Self-Study Report, to provide consultant assistance to the program, and to formulate recommendations regarding program improvement.

The Internal Review Team is appointed by the EICCD Instructional Council. The team analyses all data and reports associated with the program's evaluation, conducts an on-site visit of the program, and makes recommendations. Their findings are summarized in the Internal Review Team Report. This report is submitted to the District Office of Academic Affairs and Planning and is then forwarded to the Faculty Self-Study Team and the appropriate dean(s).

VI. The Faculty Response to the Internal Review Team Report

The Faculty Self-Study Team may provide a written response to the Internal Review Team Report. This report should point out any discrepancies between the findings and recommendations of the Internal Review Team and the Faculty Self-Study Team. The response shall be provided in writing to the District Office of Academic Affairs and Planning.

VII. Decision Making by Instructional Council

The District Office of Academic Affairs and Planning submits all reports to the Chancellor, the appropriate College President, and members of the District Instructional Council.

The Instructional Council reviews all documents and formulates Plans of Actions to be undertaken by the faculty. These may include equipment approved for purchase from the Instructional Council plant fund allocation, program/curriculum changes, faculty development activities, etc. The meeting of Instructional Council shall include the three College Presidents.

The written course of action shall be provided to faculty, complete with recommended time lines for completion. Copies of all evaluation reports are kept on file in the District Office of Academic Affairs and Planning.

Schedule for Program Evaluation

The program evaluation process is designed to be a three-year process. The determination of specific programs to be evaluated in a given year is made by the EICCD Instructional Council.

CHAPTER II

PROGRAM DESCRIPTIVE INFORMATION

The Program Descriptive Information is compiled by the District Office of Academic Affairs and Planning and is provided to the Faculty Self-Study Team for use in the completion of their report. This information is essential in the identification of the program's strengths and weaknesses, the occupational outlook for the program, and the formulation of recommendations pertinent to the curriculum, facilities, equipment, and faculty development.

The District Office of Academic Affairs and Planning provides the following descriptive information for the faculty's consideration in the completion of the self-study.

- The approved AS-28 program format from the Iowa Department of Education;
- The current Course Development Models (CDMs);
- Any available national and state current and projected job opportunities in the program's occupation;
- Reports summarizing the local labor market assessment;
- Faculty data available through the Management Information Center (MIC);
- Enrollment, graduation, and placement data available in the Program Discrete Data report;
- Completers' and non-completers' transfer and placement data available from previous surveys;
- The data matrix summarizing pertinent program evaluation data collected via the current and follow-up surveys of students;
- Data available from year-end CE-4s on program costs and comparisons with state averages when available;

This information is also provided to the Internal Review Team in the completion of their report.

PROGRAM DESCRIPTIVE INFORMATION
DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING PROVIDED DATA

1. AS-28 approved program format from the Iowa Department of Education.

2. Copies of current Course Development Models (CDMs).

3. Program Discrete Data from the last five years; definitions are attached.

	1986-87	1987-88	1988-89	1989-90	1990-91
Enrollment					
% Change					
Males					
Females					
% Females					
Full Time					
Part Time					
% Full Time					
Special Needs					
% of Enrollment					
Handicapped					
Disadvantaged					
Mainstreamed					
% Mainstreamed					
Minority Enrollment					
% Minority					
Official Withdrawals					
% of Enrollment					
Total Contact Hours					
Percent Change					
Eligible					
% Eligible					
Total FTEE					
Percent Change					
Reimbursable					
% Reimbursable					
Total Graduates					
% of Enrollment					
Males					
Females					
% Females					
Placement Data of Graduates					
Survey Respondents					
Positive Placement					
% Positive Placement					
Number Employed					
Employed in Field					
% Employed in Field					
Average Salary (F-T in Field)					
Number of Respondents					

	1985-86	1987-88	1988-89	1989-90	1990-91
Program Costs					
Cost/Contact Hr.					
State Average					
Difference					

4. Cost Analysis.

	FY'88	FY'89	FY'90	FY'91
Salaries/Fringes				
Outside Services				
Materials & Supplies				
Other Current Expenses				
Travel				
Capital Expenditures				
Total Direct Cost				
Indirect Cost				
Total Cost				

Per CE-4's submitted to the
Iowa Department of Education for each fiscal year.

5. SELECTED SURVEY DATA.

Program Majors' educational objective(s), per Student Data Questionnaire, administered to currently enrolled students.

	SDQ Fall 89		SDQ Fall 90	
	N	%	N	%
Intend to graduate from program?				
Yes				
No				
If not, what alternate objective?				
No purpose				
Self-improvement				
Personal interest				
Transfer				
Upgrade skills				

Career change
Certification
To get financial aid
Other

Non-returning students' objectives, achievement of objectives, and reasons for not returning, per Non-returning Student Survey, administered each Spring of students enrolled in the previous Fall who did not return.

	Spring 90		Spring 91	
	N	%	N	%
Objective				
To complete a Voc-Tech program				
To obtain transfer credit				
To obtain an Associate degree				
To take job-related courses				
To advance in job				
for personal interest				
For career exploration				
To take prerequisite courses for professional school				
No definite purpose				

	Spring 89		Spring 90	
	N	%	N	%
Did you complete your objective?				
Fully completed				
Partially completed				
Not completed				

Five most frequently cited reasons for not returning for Spring semester (respondents could cite multiple major reasons).

Employment and transfer information on former students based on Graduate Survey conducted each fall on previous fiscal year's graduates, and the Follow-up Survey conducted each fall on students who have not been enrolled for a full year, whether or not they graduated.

Survey	N resp.	Empl	Empl in field	Educ
Graduate 88				
Graduate 89				
Graduate 90				
Follow-up 88				
Graduates				
Non-graduates				
Follow-up 89				
Graduates				
Non-graduates				

Plans to re-enroll or take additional courses

	N resp	%
Non-return 90		
Non-return 91		
Follow-up 89		
Follow-up 90		

PROGRAM DISCRETE DATA DEFINITIONS

Total Enrollment is the unduplicated headcount reported at year-end for each fiscal year. Beginning in FY 88, students classified as pre-technical were reported with the appropriate Vocational-Technical program, while previously they had been reported as Arts & Science students. Beginning in FY 89, reporting procedures were changed by the Iowa Department of Education, resulting in a decrease in headcount across all programs.

Percent Change is the percentage increase or (decrease) in total enrollment from the previous fiscal year.

Male/Female and Percent Female enrollment are shown as an indication of the gender balance in the program.

Full-Time enrollment is defined as enrollment in at least 12 credit hours in the student's last term of enrollment during the fiscal year.

Part-Time enrollment is defined as enrollment in fewer than 12 credits in the student's last term of enrollment during the fiscal year.

Percent Full-Time is listed as an indication of the extent to which students enroll in the program on a full or part-time basis.

Special Needs is the total number and percentage of students reported at year-end for each vocational program who were either handicapped or disadvantaged.

Handicapped includes students known to have a disability or handicapping condition as defined by the Iowa Department of Education. These are primarily students identified as disabled by the Vocational Rehabilitation counselor at each campus. Students known to have a Specific Learning Disability are also included in this category.

Disadvantaged includes academic and economic disadvantage and Limited English Proficiency as defined by the Iowa Department of Education. The Percent Enrollment is the percentage of total enrollment in that program for the fiscal year who were reported as having Special Needs.

Academic Disadvantage includes students who either dropped out of high school, even though they may have subsequently completed a GED; those who received placement test scores leading to recommendation of enrollment in developmental courses; and/or those who were placed on academic probation. A student needs to meet only one of these criteria to be considered disadvantaged.

Limited English Proficiency includes individuals whose native language is other than English and who have sufficient difficulty speaking, reading, writing, or understanding the English language impeding their opportunity to learn successfully in classrooms where the language of instruction is English.

Economic Disadvantage includes students who are eligible for Pell grants, College Work Study, JTPA Title II, and Promise Jobs.

Mainstreamed means the student received certain allowable supportive services deemed necessary for success in their vocational program beyond the level of services provided to non-handicapped and non-disadvantaged students. These services include but are not limited to supplemental counseling, vocational skills assessment, job seeking skills, developmental and remedial instruction, tutoring, career assessment, study skills and other specialized educational services.

Percent Mainstreamed is the percentage of special needs students served with supportive services.

Minority enrollment is the number of minority students reported at year-end for each vocational program, with the percentage of total enrollment for the program also indicated.

Official Withdrawals is the number of students in each vocational program who officially withdrew during the fiscal year and are reported as "Leavers" on the year-end reports. The percentage of total enrollment for the program is also shown.

Total Contact Hours is the number of contact hours reported for each program at year-end. Beginning in FY 88, all Developmental Education contact hours taken by Vocational Technical students were removed from the program and reported under the Special Needs program administered by Community Education, reducing the number of contact hours reported for the programs. Beginning in FY 89, reporting procedures were changed by the Iowa Department of Education, resulting in an increase in contact hours across all programs.

Percent Change is the percentage increase or (decrease) in total contact hours from the previous fiscal year.

Eligible is the number of contact hours eligible for state reimbursement for each program. Generally, these are hours taken by Iowa residents.

Percent Eligible is the percentage of all contact hours which are eligible for each fiscal year.

Total FTEE is the number of Full-Time Equivalent Enrollments reported at year-end for each program. FTEE is obtained by dividing the number of lecture hours and half the number of lab (and clinical or work experience) hours for each program by 540 FTEE = (lecture +(1/2 lab)/540).

Percent Change is the percentage increase or (decrease) in total FTEE from the previous fiscal year.

Reimbursable is the number of FTEE eligible for reimbursement.

Percent Eligible is the percentage of the total FTEE which is eligible for each fiscal year.

Total Graduates is the number of students awarded a degree, diploma, or certificate in each program during the fiscal year.

Percent of Enrollment is the percentage of the Total Enrollment in that program who graduated.

Placement data of Graduates are based on the results of the Graduate Survey for each year. Through FY 88, the Graduate Survey was sent to graduates of the previous summer, fall, and spring terms. For FY 89, the survey was sent to summer 88, fall 88, spring 89, and summer 89 graduates. Beginning in FY 90, the survey was sent to graduates of the fall, spring, and immediately preceding summer terms.

Positive Placement includes those who are employed, enrolled in an educational institution, in military service, and those not in the labor force. Percent Positive Placement is the percentage of the survey respondents who have positive placement.

Number Employed is the number who indicated their primary activity is full-, part-time, or self- employment. Number Employed in Field is those who indicated their job is related to the field of their EICCD program. Percent Employed in Field is the percentage of the survey respondents who are employed in the field of their major.

Average Salary is reported for those employed full-time in the field of their program who listed their salary. The number of respondents on whom the average salary is based is also given.

Program Costs are based on the total expenditures reported at year-end associated with each program.

Cost/Contact Hour is the total direct and indirect cost associated with each program divided by the number of contact hours reported for that program.

The State Average is obtained from a comparative cost analysis report distributed by the Iowa Department of Education. Beginning in FY 89, the state comparative reports of these expenses used the direct costs only. Therefore, nearly all programs show a marked decrease in cost per contact hour in both the EICCD and the state averages.

The Difference shows the relationship between the EICCD cost/contact hour and the state average cost/contact hour. EICCD costs which are less than the state average are shown in parentheses.

COST ANALYSIS DEFINITIONS

These data are taken from the CE-4s submitted to the Iowa Department of Education for each program showing the General Fund expenditures for each fiscal year.

Salaries/Fringes are the instructional salaries and benefits (insurance, FICA, IPERS) for full- and part-time faculty assigned to the program. Salary and benefits for faculty split between programs are paid out of the programs' budgets in proportion to their teaching assignment.

Outside Services include memberships, printing, rental of materials and equipment, and group meetings.

Materials and Supplies include office supplies, subscriptions, instructional materials, etc.

Other Current Expenses include miscellaneous expenses that do not fall into the above categories.

Travel includes all reimbursed or district paid in and out of state travel by program faculty.

Capital Expenditures include all furniture, equipment, and computer software purchased through the general fund. This does not include expenditures from the plant fund.

The Indirect Cost is the program's proportional share, based on contact hours, of the district's overhead costs, e.g., utilities, phones, postage, building maintenance, etc.

CHAPTER III

PROGRAM EVALUATION SURVEYS

Specific surveys are conducted of six different groups for the purpose of program evaluation. These surveys are conducted of the following groups.

1. Current students;
2. Graduates of the program from the past three years;
3. Part-time faculty of the program;
4. Program administrators;
5. Advisory Committee members;
6. Employers of program graduates.

The names and addresses of the current students and of the graduates of the program from the past three years are obtained printed on labels from the Management Information Center (MIC). These surveys are mailed to the students and graduates from the District Office of Academic Affairs and Planning; program faculty are asked to announce to their students the purpose of the survey and to encourage them to respond. Depending upon the rate of return from the first mailing of the survey, a second copy of the survey may be mailed.

Part-time faculty are also requested to complete a survey regarding the program; full-time faculty do not complete a survey, for they are involved in the completion of the Faculty Self-Study Report.

Administrators at the college responsible for the management and supervision of the specific program also complete a survey.

The names and addresses of the current Advisory Committee members are obtained from the appropriate department coordinator. The names and addresses of employers of program graduates are obtained from the responses provided by the graduates on their previously returned annual Graduate Survey and/or the one-year Follow-Up Survey.

The results of these surveys are presented in a data matrix format which compares the responses of each group on a number of variables. A copy of the surveys and data matrix model follow. The results of these surveys are provided to the Faculty Self-Study Team and to the Internal Review Team.

Additionally, information pertinent to the evaluation of the program collected through the current and follow-up surveys conducted of students are also provided to the Faculty Self-Study Team and to the Internal Review Team. These results are presented in a matrix format as well. A copy of the Student Survey Matrix Model also follows.

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

Dear Student:

Eastern Iowa Community College District strives to offer quality programs to all students. These efforts include a continual evaluation of our programs. Our programs are designed to meet both the needs of our students and the job market.

Would you please take a few minutes to complete the enclosed evaluation form for the program for which you are a declared major? All responses are confidential. No data or reports will identify individual names. If you are no longer enrolled in classes within this program major or have changed your major, please indicate this on the enclosed form.

Thank you for your time in completing the evaluation form. Input from our students is a most valuable resource to us in the continual improvement of our programs. Please return the completed evaluation to us in the enclosed envelope by _____ . You may mail it back to us in the postage-paid envelope, or drop it off at the College Library.

If you have any questions regarding this survey, please call Ellen Kabat at (319) 322-5015 ext. 234.

Sincerely,

John T. Blong
Chancellor

Enclosures
JTB/ghw

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

Dear Student:

A few weeks ago you should have received a survey regarding the Eastern Iowa Community College Vocational/Technical program in which you are currently enrolled.

Your responses to such a survey are very important to us, for they will assist us in evaluating and improving the quality of our present educational offerings and services.

We have not yet received a completed survey from you. We are therefore sending you another copy of the survey in the event you may have lost or misplaced the first copy. We hope you will take a few minutes to complete the survey and return it in the enclosed envelope.

Let me again stress that your responses are confidential and your name will not be used in any reports of this survey.

Would you please complete and return the survey to us by _____. We look forward to receiving your input, and we thank you again for providing the Eastern Iowa Community College District with such a valuable resource.

If you have already completed and mailed the survey, please disregard. If you have any questions regarding this survey, please call Ellen Kabat at (319) 322-5015, ext. 234.

Sincerely,

John T. Blong
Chancellor

Enclosures
JTB/ghw

Clinton Community College
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EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

STUDENT EVALUATION
_____ PROGRAM
_____ COMMUNITY COLLEGE

Your responses to these questions will be treated as confidential information. Your answers will only be part of a composite report in which individual replies are not identified.

(1-9) Please make any necessary corrections
10-14) to the name/address above.

SECTION A Directions: Please circle the correct response or provide the information requested in the space provided.

---

15) 1. Is_____your declared major?
1. Yes
2. No

IF "NO", YOUR ANSWERS TO THIS SURVEY ARE COMPLETE. PLEASE RETURN THIS SURVEY TO US IN THE ENCLOSED ENVELOPE.

16) 2. Please indicate what semester of this program you are enrolled in:
1. First Semester
2. Second Semester
3. First Summer
4. Third Semester
5. Fourth Semester
6. Second Summer

17) 3. How many semester hours are you currently enrolled for?
1. 11 semester hours or less
2. 12 semester hours or more

18) 4. When are you currently enrolled in classes:
1. Day
2. Evening
3. Both "day" and "night"

19) 5. Do you intend to complete (graduate from) this program?
1. Yes
2. No

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(20) 6. What is your primary purpose in enrolling in this vocational program? (Circle one)

1. To prepare for a job (obtain employment)
2. To make a career change
3. To upgrade my present skills
4. To take courses for career exploration
5. To obtain or maintain certification
6. To take courses for personal interest or self-improvement
7. To transfer to a four-year college or university
8. Other (please specify)_____

(21) 7. Are you currently working?

1. Yes
2. No

→ If you answered "yes" to Question 7, please answer Questions 8 & 9.

(22) 8. Are you working full or part time?

1. Full time (40 or more hours per week)
2. Part time (less than 40 hours per week)

(23) 9. Are you working in a job related to the program in which you are enrolled?

1. Yes
2. No

SECTION B

Directions: Please rate your program on each of the following statements by circling the number corresponding to your response. When responding, limit your consideration to courses specific to your program.

Rating Scale

1 = Excellent
2 = Good
3 = Average
4 = Poor
5 = Very Poor
6 = Don't know/no opinion

		E	G	A	P	VP	DK
	Rate the instructors in the program on the following characteristics:						
(24)	10. Knowledge and competence	1	2	3	4	5	6
(25)	11. Up-to-date and current	1	2	3	4	5	6
(26)	12. Interest in helping students	1	2	3	4	5	6
(27)	13. Teaching methods	1	2	3	4	5	6
(28)	14. Availability outside the classroom	1	2	3	4	5	6
(29)	15. Availability to provide individualized instruction	1	2	3	4	5	6
	Rate the course objectives on the following characteristics:						
(30)	16. Availability--are distributed to students	1	2	3	4	5	6
(31)	17. Relevance--describe what I need to learn	1	2	3	4	5	6
(32)	18. Accurately reflect what is taught	1	2	3	4	5	6
(33)	19. Are used to measure my performance and knowledge	1	2	3	4	5	6
(34)	20. Meet my needs and interests	1	2	3	4	5	6

23

		E	G	A	P	VP	DK
	Rate the instructional materials (textbook, reference materials, etc.) on the following characteristics:						
(35)	21. Current and relevant to the subject	1	2	3	4	5	6
(36)	22. Fair and objective, not biased toward traditional sex roles	1	2	3	4	5	6
(37)	23. Adequacy of library resources	1	2	3	4	5	6
	Rate the facilities, equipment, and materials on the following characteristics:						
(38)	24. Availability when students need to use them	1	2	3	4	5	6
(39)	25. Adequacy	1	2	3	4	5	6
(40)	26. Maintenance of equipment	1	2	3	4	5	6
	Required general education courses are:						
(41)	27. Current and up-to-date	1	2	3	4	5	6
(42)	28. Meaningful	1	2	3	4	5	6
	Rate the following Student Support Services:						
(43)	29. Assessment of basic academic skills (reading, writing, mathematical)	1	2	3	4	5	6
(44)	30. Developmental learning services	1	2	3	4	5	6
(45)	31. Tutoring services	1	2	3	4	5	6
(46)	32. Guidance and counseling services	1	2	3	4	5	6
(47)	33. Financial aid	1	2	3	4	5	6
(48)	34. Career guidance/job-seeking skills development	1	2	3	4	5	6
(49)	35. Job placement services	1	2	3	4	5	6
(50)	36. Information about college transfer	1	2	3	4	5	6
	Rate the Advising you have received:						
(51)	37. Explanation of the requirements, alternatives, and benefits of my program	1	2	3	4	5	6
(52)	38. Assessment of my progress toward my diploma/degree	1	2	3	4	5	6
	Rate the program as a whole:						
(53)	39. Preparation to work in the field	1	2	3	4	5	6
(54)	40. Availability of related work experiences in lab, clinical, practicum, or coop	1	2	3	4	5	6
(55)	41. Preparation for transfer to a four-year college	1	2	3	4	5	6
(56)	42. The overall quality of education provided	1	2	3	4	5	6

(57) 43. I would recommend this <u>program</u> to others.
1. Definitely yes
2. Probably
3. Uncertain
4. Probably not
5. Definitely not

(58) 44. I would recommend this <u>college</u> to others.
1. Definitely yes
2. Probably
3. Uncertain
4. Probably not
5. Definitely not

(59) 45. What do you feel are the major strengths of this program?

(60) 46. What do you feel are the major weaknesses of this program?

(61) 47. Feel free to make any additional comments concerning your program or experiences at the EICCD.

Thank you for completing this survey. Please return it in the enclosed postage-paid envelope to the Eastern Iowa Community College District, District Office of Academic Affairs and Planning, 306 West River Drive, Davenport, IA 52801.

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

Dear Graduate:

Eastern Iowa Community College strives to offer quality programs to all students. These efforts include a continual evaluation of our programs. Your experience on the job could be very valuable in helping us to improve and update the programs; therefore, your insight into the current program is requested.

As a graduate of this institution, please take a few minutes to complete and return the enclosed forms. All information you supply will be held in confidence and your name will not be used in any report.

Thank you for your time in completing the evaluation form. Input from our graduates is a most valuable resource to us in the continual improvement of our programs. Please return the completed evaluation to us in the enclosed, postage-paid envelope by _____.

If you have any questions regarding this survey, please call Ellen Kabat at (319) 322-5015 ext. 234.

Sincerely,

John T. Blong
Chancellor

Enclosures
JTB/ghw

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

Dear Graduate:

A few weeks ago you should have received a survey regarding the Eastern Iowa Community College Vocational/Technical program you completed within the past three years.

Your responses to such a survey are very important to us, for they will assist us in evaluating and improving the quality of our present educational offerings and services.

We have not yet received a completed survey from you. We are therefore sending you another copy of the survey in the event you may have lost or misplaced the first copy. We hope you will take a few minutes to complete the survey and return it in the enclosed envelope.

Let me again stress that your responses are confidential and your name will not be used in any reports of this survey.

Would you please complete and return the survey to us by _____. We look forward to receiving your input, and we thank you again for providing the Eastern Iowa Community College District with such a valuable resource.

If you have already completed and mailed the survey, please disregard. If you have any questions regarding this survey, please call Ellen Kabat at (319) 322-5015, ext. 234.

Sincerely,

John T. Blong
Chancellor

Enclosures
JTB/ghw

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-3015 • FAX (319) 322-3956

GRADUATE EVALUATION SURVEY
_____ PROGRAM
_____ COMMUNITY COLLEGE

Your responses to these questions are confidential. Your answers will only be part of a composite report in which individual replies are not identified.

I(1-9) (10-14) Please make any necessary corrections to the name/address above.

SECTION A EVERYONE SHOULD COMPLETE SECTION A

DIRECTIONS: For each of the following questions, please indicate your response by circling the number corresponding to your answer.

(15) 1. Our records indicate that you graduated from (completed) the _____ program.
1. Yes, I graduated from this program. If yes, please complete this survey.
2. No, I did not graduate from this program.

IF NO, YOUR ANSWERS TO THIS SURVEY ARE COMPLETE. PLEASE RETURN IT IN THE ENCLOSED ENVELOPE. THANK YOU.

2. Upon completion of this program, which of the following did you obtain? (Circle all that apply)
(16) 1. Certificate
(17) 2. Diploma
(18) 3. Associate in Applied Science

(19) 3. What was your primary purpose when you enrolled in this vocational program? (Circle one)
1. To prepare for a job (obtain employment)
2. To make a career change
3. To upgrade my skills
4. To take courses for career exploration
5. To obtain or maintain certification
6. To take courses for personal interest or self-improvement
7. To transfer to a four-year college or university
8. Other (please specify)_____

(20) 4. Did you meet your objective in Question 3 before leaving the program?
1. Yes
2. No

(21) 5. What is your current employment status? (Circle one)
1. Employed (includes all employment, even if below your qualifications).
2. Full-time military service.
3. Unemployed (not employed, but actively seeking employment).
4. Not in labor force (not employed and not seeking employment because of choice, illness, full-time student status, retirement, pregnancy, or other such reason).

IF YOU CIRCLED RESPONSE 1 OR 2 IN QUESTION 5, PLEASE RESPOND TO ALL QUESTIONS BOTH SECTIONS B AND C. IF YOU CIRCLED RESPONSE 3 OR 4, PLEASE SKIP SECTION B AND GO ON TO ANSWER THE QUESTIONS IN SECTION C.

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SECTION B **ONLY THOSE RESPONDENTS WHO ARE CURRENTLY EMPLOYED OR IN THE MILITARY SHOULD ANSWER THE QUESTIONS IN SECTION B.** Please answer Questions 6 through 14 by circling the number corresponding to the correct response or by providing the appropriate answer in the space provided.

(22) 6. Are you employed in the field for which you were prepared in this program?
1. Yes
2. No ⟶ If no, please skip to Question 26.

ONLY THOSE RESPONDENTS WHO ARE EMPLOYED IN A POSITION RELATED TO THIS PROGRAM SHOULD ANSWER QUESTIONS 7-25.

We would like to contact your employer to obtain some information needed for the evaluation of our career programs. Please indicate the name and address of your employer in the space provided.

(23-62) 7. Name of your current primary employer: _____
(1-72) Address: _____
(1-30) Your current title: _____

(31) 8. Which of the following best describes your employment?
1. Full time with one employer
2. Part time with one employer
3. Several part time employers simultaneously

(32) 9. How important do you feel your vocational instruction was in obtaining employment? (Circle one)
1. Of major importance
2. Of some importance
3. Neutral
4. Of little importance
5. Of no importance

(33) 10. How well do you feel your vocational instruction prepared you to perform in your employment? (Circle one)
1. Very well
2. Reasonably well
3. Well enough to get along
4. Not well
5. Of no value

(34) 11. How difficult was it to find employment? (Circle one)
1. Very difficult
1. Difficult
3. With some difficulty
4. Somewhat easy
5. Easy

(35) 12. After I started looking for a job, I found my employment-related position in: (Circle one)
1. I was employed in this field before completing the program (excluding cooperative experience)
2. Less than 30 days
3. 30-90 days
4. 91-180 days
5. 181 days or more

(36) 13. How long have you been in your current position?
1. Less than one year
2. One but less than two years
3. Two but less than four years
4. Four but less than six years
5. Six but less than eight years
6. Eight years or more

(37-40) 14. Please indicate your current hourly wage: $_____

DIRECTIONS: Please rate how well the program prepared you in the following skills and competencies necessary for entry-level employment in the field by circling the number corresponding to your response.

Rating Scale 1 = Excellent 4 = Poor
2 = Good 5 = Very poor
3 = Average 6 = Don't know/no opinion

		E	G	A	P	VP	DK
(41)	15. Reading skills	1	2	3	4	5	6
(42)	16. Writing skills	1	2	3	4	5	6

		E	G	A	P	VP	DK
(43)	17. Speaking skills	1	2	3	4	5	6
(44)	18. Listening skills	1	2	3	4	5	6
(45)	19. Mathematical skills	1	2	3	4	5	6
(46)	20. Basic technical knowledge	1	2	3	4	5	6
(47)	21. Job skills	1	2	3	4	5	6
(48)	22. How to analyze situations and make appropriate decisions	1	2	3	4	5	6
(49)	23. Ability to get along with others on the job	1	2	3	4	5	6
(50)	24. Professional attitude, work habits, and attentiveness to quality	1	2	3	4	5	6
(51)	25. Please list any additional skills/competencies which you wish you had acquired in your college program:						

SECTION C Directions: Please rate your program on each of the following statements by circling the appropriate response. When responding, limit your consideration to courses specific to your program.

Rating Scale 1 = Excellent 4 = Poor
2 = Good 5 = Very Poor
3 = Average 6 = Don't know/no opinion

		E	G	A	P	VP	DK
	Rate the instructors in the program from which you graduated on the following characteristics:						
(52)	26. Knowledge and competence	1	2	3	4	5	6
(53)	27. Up-to-date and current	1	2	3	4	5	6
(54)	28. Interest in helping students	1	2	3	4	5	6
(55)	29. Teaching methods	1	2	3	4	5	6
(56)	30. Availability outside the classroom	1	2	3	4	5	6
(57)	31. Availability to provide individualized instruction	1	2	3	4	5	6
	Rate the course objectives from the courses you took on the following characteristics:						
(58)	32. Availability--were distributed to students	1	2	3	4	5	6
(59)	33. Relevance--described what I needed to learn	1	2	3	4	5	6
(60)	34. Accurately reflected what was taught	1	2	3	4	5	6
(61)	35. Were used to measure my performance	1	2	3	4	5	6
(62)	36. Met my needs and interests	1	2	3	4	5	6
	Rate the instructional materials (text, reference materials, etc.) from the courses you took on the following characteristics:						
(63)	37. Current and relevant to the subject	1	2	3	4	5	6
(64)	38. Fair and objective, not biased toward traditional sex roles	1	2	3	4	5	6
(65)	39. Adequacy of library resources	1	2	3	4	5	6
	Rate the facilities, equipment, and materials on the following characteristics:						
(66)	40. Availability when students need to use them	1	2	3	4	5	6
(67)	41. Adequacy	1	2	3	4	5	6
(68)	42. Maintenance of equipment	1	2	3	4	5	6
	Required general education courses were:						
(69)	43. Current and up-to-date	1	2	3	4	5	6
(70)	44. Meaningful	1	2	3	4	5	6
IV	Student Support Services were:						
(1)	45. Assessment of basic academic skills (reading, writing, mathematical)	1	2	3	4	5	6
(2)	46. Developmental learning services	1	2	3	4	5	6
(3)	47. Tutoring services	1	2	3	4	5	6
(4)	48. Guidance and counseling services	1	2	3	4	5	6
(5)	49. Financial aid	1	2	3	4	5	6
(6)	50. Career guidance/job seeking skills development	1	2	3	4	5	6
(7)	51. Job placement services	1	2	3	4	5	6
(8)	52. Information about college transfer	1	2	3	4	5	6

		E	G	A	P	VP	DK
	Rate the advising you received:						
(9)	53. Explanation of the requirements, alternatives, and benefits of my program	1	2	3	4	5	6
(10)	54. Assessment of my progress toward my diploma/degree	1	2	3	4	5	6
	Rate the program as a whole:						
(11)	55. Preparation to work in the field	1	2	3	4	5	6
(12)	56. Availability of related work experiences in lab, clinical, practicum, or coop	1	2	3	4	5	6
(13)	57. Preparation for transfer to a four-year college	1	2	3	4	5	6
(14)	58. The overall quality of education provided	1	2	3	4	5	6

(15) 59. If you were advising our current students about this program what would you tell them?

(16) 60. How would you rate the availability of jobs in the occupational area of your program?
(Circle one)
1. Very good
2. Good
3. Average
4. Poor
5. Very Poor

(17) 61. I would recommend this program to others.
1. Definitely yes
2. Probably
3. Uncertain
4. Probably not
5. Definitely not

(18) 62. I would recommend this college to others.
1. Definitely yes
2. Probably
3. Uncertain
4. Probably not
5. Definitely not

(19) 63. How did the vocational instruction you received in this program compare with your expectation?
(Circle one)
1. Outstanding
2. Above expectation
3. Met expectation
4. Below expectation
5. Unsatisfactory

(20) 64. What do you feel were the major strengths of this program?

(21) 65. What do you feel were the major weaknesses of this program?

(22) 66. Feel free to make any additional comments concerning your program or experiences at the EICCD.

Thank you for completing this survey. Please return it in the enclosed postage-paid envelope to the Eastern Iowa Community College District, District Office of Academic Affairs and Planning, 306 West River Drive, Davenport, IA 52801.

Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

_____, ____

Dear :

The Eastern Iowa Community College District strives to offer quality programs to all students. These efforts include a continual evaluation of our programs. One of the programs selected by Instructional Council for formal evaluation this semester is the _____ program at all three colleges.

One of the important components of the EICCD program evaluation process is the input from part-time faculty for each program. Enclosed is a Part-time Faculty survey which we'd like you to complete. Would you please complete this survey and return it to me in the enclosed postage-paid envelope or through intercampus mail by _____, _____.

Please feel free to contact me at the District Office, 322-5015 ext. 234 if you have any questions.

Sincerely,

Ellen J. Kabat
Associate Director of Program Development
and Alternative Delivery Systems

Enclosure
EBK/ghw

Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

_____, ____

Dear _____,

A few weeks ago you should have received a survey regarding the Eastern Iowa Community College _____ program.

Your responses to this survey are very important to us, for they will assist us in evaluating and improving the quality of our present educational offerings and services.

We have not yet received the completed survey from you. We are therefore sending you another copy of the survey in the event you may have lost or misplaced the first copy. We hope you will take a few minutes to complete the survey and return it in the enclosed envelope.

Let me again stress that your responses are confidential and your name will not be used in any reports of this survey.

Please complete and return the survey to us by _____. We look forward to receiving your input, and we thank you again for providing the Eastern Iowa Community College District with information to assist in the evaluating of our programs.

If you have already completed and mailed the survey, please disregard this second request. Please feel free to contact me at the District Office, 322-5015 ext. 234 if you have any questions.

Sincerely,

Ellen J. Kabat
Associate Director of Program Development
and Alternative Delivery Systems

Enclosure

33

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-3013 • FAX (319) 322-3956

PART-TIME FACULTY PERCEPTIONS SURVEY

_____ PROGRAM

_____ COMMUNITY COLLEGE

I(1)
(2-6)

Your responses to these questions will assist in identifying the strengths and weaknesses of this program. Your responses to these questions will be treated as confidential.

Please circle the number corresponding to your response as defined in the rating scale:

Rating Scale
1 = Excellent
2 = Good
3 = Average
4 = Poor
5 = Very Poor
6 = Don't know/no opinion

		E	G	A	P	VP	DK
(7)	1. The job success of graduates from your program.	1	2	3	4	5	6
(8)	2. The program's response to changing technologies and procedures in your occupational area.	1	2	3	4	5	6
(9)	3. Provision for time for program planning and coordination.	1	2	3	4	5	6
(10)	4. The provision of time and resources for your professional development.	1	2	3	4	5	6
(11)	5. The usefulness of the Course Development Model (CDM) as an instructional tool.	1	2	3	4	5	6
(12)	6. The availability of objectives for the program's courses.	1	2	3	4	5	6
(13)	7. The accuracy of the objectives for the courses in describing what a student needs to learn for entry-level employment in the field.	1	2	3	4	5	6
(14)	8. The relevancy of the objectives for courses to the work place.	1	2	3	4	5	6
(15)	9. Evaluation of student achievement of course objectives.	1	2	3	4	5	6
(16)	10. The adequacy and availability of instructional materials for your program.	1	2	3	4	5	6
(17)	11. The adequacy and availability of library resources for your program.	1	2	3	4	5	6
(18)	12. The availability of related work experience (clinical, practicum, or coop) for students in your program.	1	2	3	4	5	6
(19)	13. The adequacy and relevance of equipment to the job situation.	1	2	3	4	5	6
(20)	14. The maintenance of equipment.	1	2	3	4	5	6
(21)	15. The sense of shared purpose among program faculty.	1	2	3	4	5	6
(22)	16. The adequacy and relevance of the facilities to the job situation.	1	2	3	4	5	6
(23)	17. The college's response to employer recommendations for program modifications.	1	2	3	4	5	6
(24)	18. Efforts to provide course and program placement assistance to students.	1	2	3	4	5	6
(25)	19. The extent to which the program's goals are achieved.	1	2	3	4	5	6
(26)	20. The overall quality of the program.	1	2	3	4	5	6
(27)	21. The overall image of the program in the community.	1	2	3	4	5	6

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		E	G	A	P	VP	DK
	Please rate the effectiveness of the following Student Services:						
(28)	22. Guidance and Counseling	1	2	3	4	5	6
(29)	23. Library	1	2	3	4	5	6
(30)	24. Financial Aid	1	2	3	4	5	6
(31)	25. Developmental Learning Services	1	2	3	4	5	6
(32)	26. Tutoring Services	1	2	3	4	5	6
(33)	27. Job Placement	1	2	3	4	5	6
(34)	28. Advising	1	2	3	4	5	6
(35)	29. Assessment of students' basic skills	1	2	3	4	5	6
	There should be effective interaction between the instructor and other professional staff. How would you rate your interaction with those listed below.						
(36)	30. Other instructors	1	2	3	4	5	6
(37)	31. Your Department Chair	1	2	3	4	5	6
(38)	32. Dean of Academic Affairs	1	2	3	4	5	6
(39)	33. Student Development Staff	1	2	3	4	5	6
(40)	34. Secretarial staff	1	2	3	4	5	6
(41)	35. Development Studies	1	2	3	4	5	6
(42)	36. Library staff	1	2	3	4	5	6
(43)	37. Media personnel	1	2	3	4	5	6
(44)	38. Registrar	1	2	3	4	5	6

(45) 39. List the major strengths of the program/curriculum.

(46) 40. List the major concerns of the program/curriculum.

(47) 41. List your recommendations for the program, and any other comments you may have.

Thank you for completing this survey. Please return it to the District Office of Academic Affairs and Planning via intercampus mail.

MEMORANDUM

TO: Presidents
Deans of Colleges
Deans of Academic Affairs
Deans of Student Development

FROM: Ellen Kabat

SUBJECT: Program Evaluation Process
Administrator surveys

DATE: _____

As you know, we have embarked on a new cycle of evaluation of the EICCD vocational-technical programs. The programs selected by Instructional Council for evaluation this semester are as follows:

_____
_____
_____
_____
_____
_____
_____

One of the important components of the EICCD program evaluation process is the input from administrators who oversee and work with each program. Enclosed are Administrator surveys for the programs we'd like you to evaluate. Would you please complete these surveys and return them to me by _____.

Please feel free to contact me at the District Office ext. 234 if you have any questions.

EK/gw

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-3015 • FAX (319) 322-3956

I(1-5)

PROGRAM EVALUATION - ADMINISTRATOR SURVEY

_____ PROGRAM
_____ COMMUNITY COLLEGE

(6-8) Please indicate your name: _____

Please rate the following program characteristics by circling the number corresponding to your response for each statement. Your response should relate only to the program stated above. If you have any reservations regarding a specific response, please provide a brief explanation following each item.

Rating Scale
1 = Excellent
2 = Good
3 = Average
4 = Poor
5 = Very Poor
6 = Don't know/no opinion

		E	G	A	P	VP	DK
(9)	1. The overall quality of education a student receives in this program.	1	2	3	4	5	6
	Comments:						
(10)	2. The availability of goals and objectives of this program to all program faculty.	1	2	3	4	5	6
	Comments:						
(11)	3. The extent to which major goals and objectives of this program are achieved.	1	2	3	4	5	6
	Comments:						
(12)	4. The image of this program in the community.	1	2	3	4	5	6
	Comments:						

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		E	G	A	P	VP	DK
(13)	5. The program's responsiveness to change and suggestion.	1	2	3	4	5	6
	Comments:						
(14)	6. The knowledge and competence of program faculty in their subject areas.	1	2	3	4	5	6
	Comments:						
(15)	7. The adequacy of time for planning and coordination by faculty.	1	2	3	4	5	6
	Comments:						
(16)	8. The faculty's relationship with students.	1	2	3	4	5	6
	Comments:						
(17)	9. The opportunities faculty are provided to expand their knowledge and skills.	1	2	3	4	5	6
	Comments:						
(18)	10. The faculty's working relationship with members of other organizational units of the college.	1	2	3	4	5	6
	Comments:						
(19)	11. The sense of community, a feeling of shared purpose and interest amongst the faculty.	1	2	3	4	5	6
	Comments:						

		E	G	A	P	VP	DK
(20)	12. The effectiveness of advising to students in the program.	1	2	3	4	5	6
	Comments:						
(21)	13. The program's leadership.	1	2	3	4	5	6
	Comments:						
(22)	14. The viability of the program.	1	2	3	4	5	6
	Comments:						
	Rate the adequacy of the following resources of the program.						
(23)	15. Equipment	1	2	3	4	5	6
(24)	16. Materials	1	2	3	4	5	6
(25)	17. Facilities	1	2	3	4	5	6
(26)	18. Faculty	1	2	3	4	5	6
(27)	19. Budget	1	2	3	4	5	6
	Comments:						
	Rate the adequacy of the following support services provided for students in this program.						
(28)	20. Library	1	2	3	4	5	6
(29)	21. Guidance and Counseling	1	2	3	4	5	6
(30)	22. Financial Aid	1	2	3	4	5	6
(31)	23. Developmental Learning Services	1	2	3	4	5	6
(32)	24. Tutoring Services	1	2	3	4	5	6
(33)	25. Job Placement	1	2	3	4	5	6
	Comments:						

(34) 26. What do you feel are the major strengths of this program?

(35) 27. What do you feel are the major weaknesses of this program?

(36) 28. How would you describe the future of this program?

(37) 29. General Program Comments/Recommendations:

Thank you for completing this survey. Please return it via intercampus mail to the District Office of Academic Affairs and Planning to the attention of Dana Coker.

Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-3013 • FAX (319) 322-3956

_____

Dear :

Eastern Iowa Community College District strives to offer quality programs to all students. These efforts include a continual evaluation of our programs.

Your views as an Advisory Committee member to the _____ Program are very important to us. Would you please take a few minutes, and complete the enclosed survey? No Advisory Committee member will be identified in the results of this evaluation, and all responses will be kept in complete confidence.

Thank you for your time in completing the evaluation. Please return it to us in the enclosed, postage-paid envelope by _____.

At a future meeting of your Advisory Committee, the results of the program evaluation will be reviewed. Once again, thank you for your time in completing this evaluation.

If you have any questions about this survey, please do not hesitate to call Ellen Kabat at (319) 322-5015, extension 234.

Sincerely,

John T. Blong
Chancellor

Enclosure
JTB/ghw

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

_____

Dear :

A few weeks ago you should have received a survey regarding the _____ program of which you are an Advisory Committee member.

We have not yet received a completed survey from you. We are therefore sending you another copy of the survey in the event you may have lost or misplaced the first copy. We hope you will take a few minutes to complete the survey and return it in the enclosed envelope.

Let me again stress that your responses are confidential and your name will not be used in any report of this survey. Would you please complete and return the survey to us by _____. We look forward to receiving your input, and we thank you again for providing the Eastern Iowa Community College District with such a valuable resource.

If you have already completed and mailed the survey, please disregard. If you have any questions regarding this survey, please do not hesitate to call Ellen Kabat at (319) 322-5015, extension 234.

Sincerely,

John T. Blong
Chancellor

Enclosure
JTB/ghw

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

I(1-2)
(3-7)

ADVISORY COMMITTEE PERCEPTIONS SURVEY
_____ PROGRAM
_____ COMMUNITY COLLEGE

Your responses to these questions are confidential. Your answers will be used only as a part of a composite report.

Directions: Please rate how well the program prepares graduates in the following skills needed for entry-level employment by circling the number corresponding to your response.

Rating scale 1 = Excellent 4 = Poor
2 = Good 5 = Very Poor
3 = Average 6 = Don't know/no opinion

		E	G	A	P	VP	DK
(8)	1. Reading skills	1	2	3	4	5	6
(9)	2. Writing skills	1	2	3	4	5	6
(10)	3. Speaking skills	1	2	3	4	5	6
(11)	4. Listening skills	1	2	3	4	5	6
(12)	5. Mathematical skills	1	2	3	4	5	6
(13)	6. Technical knowledge	1	2	3	4	5	6
(14)	7. Job skills	1	2	3	4	5	6
(15)	8. How to analyze situations and make appropriate decisions.	1	2	3	4	5	6
(16)	9. Ability to get along with others on the job.	1	2	3	4	5	6
(17)	10. The process of seeking employment.	1	2	3	4	5	6
(18)	11. Appropriate work habits, attitudes, and attentiveness to quality.	1	2	3	4	5	6

Directions: Please rate the program on the following characteristics:

(19)	12. Meets the needs of local business and labor market.	1	2	3	4	5	6
(20)	13. Response to changing technologies and procedures in the field.	1	2	3	4	5	6
(21)	14. Response to emerging employment training opportunities in the field.	1	2	3	4	5	6
(22)	15. Response to recommendations by employers for program modifications.	1	2	3	4	5	6
(23)	16. Is a valuable resource in providing job placement assistance to students.	1	2	3	4	5	6
(24)	17. The overall quality of this program.	1	2	3	4	5	6
(25)	18. What, in your opinion, is the short-term (1-3 year) job outlook for program graduates in this occupation?	1	2	3	4	5	6
(26)	19. What, in your opinion, is the long-term (4 years or more) job outlook for program graduates in this occupation?	1	2	3	4	5	6

(27) 20. Compare the graduates of the program from other entry-level employees who did not complete such a program. (Circle one)
1. Better prepared
2. About the same
3. Less prepared
4. No basis for comparison

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(28) 21. In what ways has your advisory committee helped to improve the instructional program in your field (i.e., assisting faculty on curriculum development or revisions, identifying work experience and employment opportunities), identifying donors for equipment and materials)?

(29) 22. What are the principal strengths of the program?

(30) 23. What are the principal needs for improvement in the program?

(31) 24. During the past year has your organization hired students from the program?

(32-34)
1. Yes → If yes, how many do you estimate were hired? _____
2. No → If no, please indicate why not: _____

_____

(35) 25. Does your organization plan to hire any students from the program in the next year?
(36-38)
1. Yes → If yes, please estimate how many: _____
2. No

(39) 26. How long have you been a member of this Advisory Committee?
1. Less than one year
2. 1-2 years
3. 3-5 years
4. More than five years

(40) 27. How often does this Advisory Committee meet?
1. Once every two years
2. Once a year
3. Twice a year
4. 3 times a year
5. 4 or more times a year
6. Do not know

(41) 28. Do you have any recommendations for improving the role of the Advisory Committee?

(42) 29. Feel free to make any additional comments concerning this program.

Thank you for completing this survey. Please return it in the enclosed postage-paid envelope to the Eastern Iowa Community College District, Attention: District Office of Academic Affairs and Planning, 306 West River Drive, Davenport, Iowa 52801.

Clinton Community College
Scott Community College
Muscatine Community College

EASTERN IOWA COMMUNITY COLLEGE DISTRICT

DISTRICT OFFICE OF ACADEMIC AFFAIRS AND PLANNING
306 West River Drive • Davenport, Iowa 52801-1221
(319) 322-5015 • FAX (319) 322-3956

Employer
EAddress
ECity, St *EZip*

Dear Employer:

Eastern Iowa Community College District (EICCD) strives to offer quality programs to all students. These efforts include a continual evaluation of our programs. Our programs are designed to meet both the needs of our students and the job market.

The individual whose name appears on the enclosed survey is a former student of a career program at EICCD who indicated he/she is now working for you. We would very much appreciate your taking a few minutes to give us your opinions, suggestions, and comments about the preparation this employee received based on your experience with him/her.

Your responses to the evaluation will help us to identify the strengths and weaknesses of our present programs. You will be making a valuable contribution to the improvement of the education of future students. No employer, supervisor or employee will be identified in the results of this study, and all responses will be kept in complete confidence.

Thank you for your time in completing the evaluation form. Input from employers is a most valuable resource to us in the continual improvement of our programs. Please return the completed evaluation to us in the enclosed envelope by March 15, 1991.

If you have any questions about this survey, please do not hesitate to call Ellen Kabat at (319) 322-5015 extension 234.

Sincerely,

John T. Blong
Chancellor

Enclosure
JTB/ghw

EASTERN IOWA COMMUNITY COLLEGE DISTRICT
Office of Academic Affairs and Planning

EMPLOYER EVALUATION OF CAREER PROGRAM GRADUATES

Employer*
Address*
City, St* *EZip*

Your responses to these questions will be treated as confidential information. Your answers will only be part of a composite report in which individual replies are not identified.

Please ask a supervisor familiar with the work of the person listed below to complete and return this survey in the envelope provided as soon as possible. Please answer each of the questions as completely and honestly as possible. The following graduate has indicated that he/she is working for you:

1-9) Employee: *Student*

10-14) EICCD Career Program: *MName*

15) 1. Is this graduate still employed by you?
1. Yes
2. No --> If no, please answer questions 2 and 3.

16-18) 2. How long was the graduate employed? _____

19) 3. Why did he/she leave? _____

20) 4. What is/was your relationship to this employee? (circle one)
1. Employer
2. Personnel staff
3. Immediate Supervisor
4. Co-worker

21-24) 5. What is this employee's current hourly wage? $_____

Please rate the performance of the graduate on the following competencies, bearing in mind that you are evaluating this employee's training and preparation as reflected in job performance, work habits, and other work-related characteristics.

1 = Excellent
2 = Good
3 = Neutral
4 = Poor
5 = Very Poor
6 = Don't Know/No Opinion

			E	G	N	P	VP	DK
25)	6.	Reading skills	1	2	3	4	5	6
26)	7.	Writing skills	1	2	3	4	5	6
27)	8.	Speaking skills	1	2	3	4	5	
28)	9.	Listening skills	1	2	3	4	5	6
29)	10.	Mathematical skills	1	2	3	4	5	6
30)	11.	Basic technical knowledge	1	2	3	4	5	6
31)	12.	Job skills	1	2	3	4	5	6
32)	13.	Basic interpersonal skills in getting along with others	1	2	3	4	5	6
33)	14.	Professional attitudes and work habits	1	2	3	4	5	6
34)	15.	Self-confidence	1	2	3	4	5	6
35)	16.	Ability to analyze situations and make appropriate decisions	1	2	3	4	5	6
36)	17.	The overall quality of this graduate's work	1	2	3	4	5	6

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Please answer the following questions about the program in general, taking into consideration all program graduates who have worked for you, using the same scale as above.

			E	G	N	P	VP	DK
(37)	18.	The program's response to change and suggestion	1	2	3	4	5	6
(38)	19.	Meets the needs of the local business and labor market	1	2	3	4	5	6
(39)	20.	The preparation of program graduates for employment in the field	1	2	3	4	5	6
(40)	21.	The overall quality of the program	1	2	3	4	5	6
(41)	22.	The job outlook for program graduates in this occupation in the short-term future (1-3 years)	1	2	3	4	5	6
(42)	23.	The job outlook for program graduates in this occupation in the distant future (3 or more years)	1	2	3	4	5	6

(43) 24. How would you compare the preparation of the EICCD program graduates to other entry-level employees who have not completed such a program?

1. EICCD graduates are better prepared.
2. They are about the same.
3. EICCD graduates are less well prepared.
4. I have no basis for comparison.

(44) 25. In what areas do you feel employees from this EICCD program are best prepared?

(45) 26. In what areas do you feel additional preparation would be helpful?

(46) 27. What, if any, specific suggestions do you have for improvements in the curriculum instruction of the EICCD program?

(47) 28. Please feel free to make any additional comments concerning this career program.

Thank you for completing this survey. Please return it in the enclosed postage-paid envelope to the Eastern Iowa Community College District, District Office of Academic Affairs and Planning, 306 West River Drive, Davenport, IA 52801.

DATA MATRIX:
PROGRAM EVALUATION SURVEY RESULTS

BACKGROUND ITEMS	SURVEY GROUP S	G	E	AC	AD	PTF
Number of respondents	-	-	-	-	-	-
Educational Objective (% yes)						
to prepare for a job	-	-	-	-	-	-
to make a career change	-	-	-	-	-	-
to upgrade present skills	-	-	-	-	-	-
career exploration	-	-	-	-	-	-
for certification	-	-	-	-	-	-
personal interest/self-improvmt	-	-	-	-	-	-
transfer to 4-year school	-	-	-	-	-	-
No response	-	-	-	-	-	-
plan to/grad from program (% yes)	-	-	-	-	-	-
achieve objective (% yes)	-	-	-	-	-	-
PROCESS ITEMS	Mean ratings on a 5-point scale: 1.00 is high, 3.00 is average, 5.00 is low; see bottom of table.					
Curriculum						
Objectives available			-	-	-	-
- -						
relevance to work place	-	-	-	-	-	-
accurate	-	-	-	-	-	-
used to eval student achievement	-	-	-	-	-	-
meet my needs and interests	-	-	-	-	-	-
General education courses relevant					-	-
- - - -						
meaningful	-	-	-	-	-	-
Faculty						
Knowledgeable	-	-	-	-	-	-
Up-to-date and current	-	-	-	-	-	-
Have opportunity to develop	-	-	-	-	-	-
Relationship with students	-	-	-	-	-	-
interest in helping students	-	-	-	-	-	-
Available outside the classroom	-	-	-	-	-	-
Available for individualized instruction	-	-	-	-	-	-
Teaching methods	-	-	-	-	-	-
Instruction compare with expectation	-	-	-	-	-	-
Leadership	-	-	-	-	-	-
Advising	-	-	-	-	-	-
explanation of program	-	-	-	-	-	-
assessment of progress	-	-	-	-	-	-

	Major Code					
Resources	**S**	**G**	**E**	**AC**	**AD**	**PTF**
Adequacy of instructional materials	-	-	-	-	-	-
current and relevant	-	-	-	-	-	-
fair and objective	-	-	-	-	-	-
Usefulness of the CDM	-	-	-	-	-	-
Library resources	-	-	-	-	-	-
Adequacy of facilities	-	-	-	-	-	-
availability when needed	-	-	-	-	-	-
Adequacy of equipment	-	-	-	-	-	-
Maintenance of equipment	-	-	-	-	-	-
Adequacy of faculty	-	-	-	-	-	-
Adequacy of budget	-	-	-	-	-	-
Student & Support Services						
Assessment of basic skills	-	-	-	-	-	-
Course & program placement for students	-	-	-	-	-	-
Developmental learning services	-	-	-	-	-	-
Tutoring services	-	-	-	-	-	-
Guidance & counseling	-	-	-	-	-	-
Library	-	-	-	-	-	-
Financial aid	-	-	-	-	-	-
Job placement	-	-	-	-	-	-
Transfer information	-	-	-	-	-	-
General Process Items						
Sense of community, shared purpose	-	-	-	-	-	-
Adequate time for coordination & planning	-	-	-	-	-	-
Effective interaction w/other staff	-	-	-	-	-	-
Work experiences (clinical, coop) available	-	-	-	-	-	-
Response to changing technologies	-	-	-	-	-	-
Response to employment training opportunities	-	-	-	-	-	-
Response to change & suggestion	-	-	-	-	-	-
OUTCOME ITEMS						
General Outcomes						
Goals of the program are achieved	-	-	-	-	-	-
Graduate are better employees	-	-	-	-	-	-
Program meets needs/local labor mkt	-	-	-	-	-	-

	Major Code					
Job Placement/Transfer Success	**S**	**G**	**E**	**AC**	**AD**	**PTF**
Job success	-	-	-	-	-	-
Employment preparation	-	-	-	-	-	-
Employed in field (%)	-	-	-	-	-	-
full/part-time (% full-time)	-	-	-	-	-	-
wage (full-time, employed in the field)	-	- (n=)	- (n=)	-	-	-
Job Outlook	-	-	-	-	-	-
short term (1-3 years)	-	-	-	-	-	-
long term (4 or more years)	-	-	-	-	-	-
Resource for job placement	-	-	-	-	-	-
Preparation for transfer	-	-	-	-	-	-
Skills						
Reading skills	-	-	-	-	-	-
Writing skills	-	-	-	-	-	-
Speaking skills	-	-	-	-	-	-
Listening skills	-	-	-	-	-	-
Mathematical skills	-	-	-	-	-	-
Technical knowledge	-	-	-	-	-	-
Job skills	-	-	-	-	-	-
Interpersonal skills	-	-	-	-	-	-
Problem-solving skills	-	-	-	-	-	-
Job-seeking skills	-	-	-	-	-	-
Professional attitude & work habits	-	-	-	-	-	-
Self-confidence	-	-	-	-	-	-
Overall quality of work	-	-	-	-	-	-
GENERAL RATINGS						
Overall quality of the program	-	-	-	-	-	-
Image in the community	-	-	-	-	-	-
Viability of the program	-	-	-	-	-	-
Would recommend program to others	-	-	-	-	-	-
Would recommend college to others	-	-	-	-	-	-

RATING SCALE

1 = Excellent
2 = Good
3 = Average
4 = Poor
5 = Very Poor
6 = Don't know
(not included in averages)

SURVEY GROUPS

S = Currently enrolled students
G = Graduates of the past 3 years
E = Employers of the above graduates
AC = Advisory Committee members
AD = Administrators
PTF = Part-time faculty

NOTES: Only the graduates employed in the field rated their skill levels. Differences in mean ratings of less than .25 are probably neither meaningful nor statistically significant.

STUDENT SURVEY SUMMARY

Number sent
Number of responses # Valid
% Return % % Valid Return %

Student Record System (SRSE) Data on Respondents

Sex	Number	Percent
Male		
Female		
Unknown		

Race

Black, non Hispanic		
White, non Hispanic		
Unknown		

First Term Enrolled

1986-87		
1987-88		
1988-89		
1989-90		
1990-91		
Unknown		

Earned Hours

0		
1-12		
13-24		
25-36		
37-48		
49-60		
61+		
Unknown		

Program Evaluation Survey Data

Semester Enrolled in

First Semester		
Second Semester		
First Summer		
Third Semester		
Fourth Semester		
Second Summer		
No Response		

Full/Part Time Enrollment

Part time		
Full time		
No response		

Major Code

Classes Enrolled in
Day
Evening
Both "day" and "night"

Currently Working
Yes
No

Working full or part-time
Full-time
Part-time

Work Related to Program
Yes
No

Intend to complete program
Yes
No

GRADUATE SURVEY SUMMARY

Number sent
Number responses
% Return %

Number valid
% Valid Return %

Student Record System (SRSE) Data on Respondents

	Number	Percent
Sex		
Male		
Female		
Unknown		
Race		
White, non Hispanic		
Unknown		
First Year Enrolled		
1981-82		
1985-86		
1986-87		
1987-88		
1988-89		
Unknown		
Year of Graduation		
1987-88		
1988-89		
1989-90		
Unknown		
Type of Award		
AAS		
Unknown		

Program Evaluation Survey Data

Completed (More than 1 response allowed)
- Certificate
- Diploma
- Associate in Applied Science

Current Employment Status
- Employed
- Full-time military service
- Unemployed
- Not in labor force

Employers

Employment related to program
Yes
No
No Response

The following items show the responses of only those graduates who are employed in a related position.

	Number	Percent
Employment description		
Full-time with one employer		
Importance of vocational instruction in obtaining employment		
Of major importance		
Of some importance		
Neutral		
Of little importance		
Of no importance		
Vocational Instruction prepared to perform employment		
Very well		
Reasonably well		
Well enough to get along	-	-
Not well	-	-
Of no value	-	-
Difficulty in finding employment		
Very difficult		
Difficult	-	-
With some difficulty	-	-
Somewhat easy	-	-
Easy		
Time to find program related employment		
Before completing program		
Less than 30 days	-	-
30-90 days		
91-180 days	-	-
181 days or more		
Length of time in current position		
Less than one year		
One but less than two years		
Two but less than four years	-	-
Four but less than six years		
Six but less than eight years	-	-
Eight years or more		

Current hourly wage $. (n =)
(mean for those employed full-time in a related position who responded)

Major Code

EMPLOYER SURVEY SUMMARY

Number Sent
Number Returned
% Returned %

Number valid
% Valid Returned %

Graduate Still Employed	Number	Percent
Yes		
No		
Relationship to employee		
Employer		
Personnel staff	-	-
Immediate Supervisor		
Co-worker		
Current hourly wage	$.	(n =)

ADVISORY COMMITTEE SUMMARY

Number sent
Number Returned # Valid
% Returned % % Valid %

Length of time on Advisory Committee	Number	Percent
Less than one year		
1-2 years	-	-
3-5 years		
More than five years		

Frequency of Advisory Committee Meetings		
Once every two years		
Once a year		
Twice a year		
3 times a year	-	-
4 or more times a year	-	-
Do not know		

Organization hired any students from program
Yes
No
Why not (See comments)

Number

Plan to hire students from program
Yes
No
No response

Number

STUDENT SURVEYS ITEM MATRIX

	SURVEY			
BACKGROUND ITEMS	**SDQ**	**NR**	**G**	**FOL**
Personal demographics				
Age	18	-	-	-
Sex	19	3	-	9
Race	20	2	-	10
SSN	26	A	B	A
Marital status	21	-	-	-
Household/dependents	22	-	-	-
Resident status	23	-	-	-
Distance from college	24	-	-	-
Sources of funding	12	-	-	-
Parents' educational level	11	-	-	-
Most recent previous activity	9	-	-	-
# years since enrolled	10	-	-	-
Reasons for leaving				
personal	-	9,11-16		5.7,8
financial		28-32		5.5
employment		24,25,27		5.3
INSTRUCTIONAL ITEMS				
Educational Plans				
Primary Objective	5	5	-	6
Reasons for continuing education	14	-	-	-
Reasons for selecting EICCD	15	-	-	-
Plan to graduate from program	4	-	-	3
Grad from program	-	-	1	4
Achieve objective	-	6	-	7
Plan to pursue objective further/where	-	7	-	8
Interested in other courses	-	35	-	58
Reason for leaving (academic)	-	8,10, 17-23	-	5.1,2, 4,6
Curriculum				
Content of courses	-	-	-	11
Quality of instruction	-	-	-	12
Instructor interest & concern	13	-	-	13,17
Out of class interaction w/instructor	16.12			38
Class size	-	-	-	14
Facilities	-	-	-	15
Equipment				16
Instructional media	-	-	-	18
Library services	-	-	-	33
Teaching methods	16.15	-	-	-
Tutoring	-	-	-	30
Developmental learning lab	-	-	-	31
Overall educational experience	-	33	10	19

	Major Code			
Educational Status	**SDQ**	**NR**	**G**	**FOL**
EICCD College/site attended	1,7	1	A	1
Major	3	B	C	B
Full/Part time	2	4	4	-
Type of classes (day/evening)	6	-	-	-
How long attended/when start	8	-	2	2
Attendance pattern	-	-	3	2
Needs for special help	13	-	-	-
Current educational status (not EICCD)	-	34	12	43
Most recent (other) college attended	-	7A	13	44
Transfer experience				
problems	-	-	14	45
credits lost	-	-	15	46
educational preparation	-	-	16	47
Occupational Status				
Current employment status	25	-	5	48,52
Employer	-	-	8	50
Wage	-	-	9	53
Employed in field prior to enrolling	-	-	-	56
Job related to coursework	-	26	7	51
Rating of educational usefulness	-	-	-	54
How courses helped	-	-	-	55
Availability of jobs	-	-	-	57
Sought employment in field	-	-	6	49
STUDENT SERVICES ITEMS				
Activities				
Student activities	-	-	-	32
Participation in activities	17	-	-	-
College encourages student involvement	16.10	-	-	37
Admissions/Registration				
Rating of admissions	16.16	-	-	20
Orientation	16.5	-	-	21
Rating of registration	16.7	-	-	22
Rating of accuracy of student records	16.6	-	-	23
Counseling				
Assessment & testing	16.17	-	-	29
Course advisement	16.4	-	-	28
Rating of guidance & counseling	16.2	-	-	27
Availability of info on other institutions	16.18	-	-	35
Transfer Services	-	-	-	24

	Major Code			
Financial Aid Services	**SDQ**	**NR**	**G**	**FOL**
Rating of financial aid services	16.1	-	-	25
Financial aid use/availability	-	28,29	-	-
Rating of veterans services	-	-	-	26
Job Placement Services				
Rating of job placement services	16.3	-	11	34
Information on employment opportunities	-	-	-	36
General Student Services & Environment				
Purpose of college	16.8	-	-	-
College responsiveness	16.9,14	-	-	40
Comfortable environment	16.11	-	-	41
Concern with satisfaction	-	-	-	39
Overall quality of environment	-	-	-	42
GENERAL				
Comments	27	36	17	59

CHAPTER IV

LABOR MARKET ASSESSMENT

Any available labor market data relevant to the program's occupational field are provided to the Faculty Self-Study Team and to the Internal Review Team for their consideration. Knowledge regarding the job market for program graduates is essential in determining the viability of the continued offering of the program. Additionally, information collected through the labor market assessment provides information regarding changes occurring in the occupational field, required entry-level employment knowledge and skills, and facility and equipment requirements.

Occupational projections are provided based on available data such as the Iowa Occupational Projections, developed by the Department of Employment Services (DES), in cooperation with the Iowa State Occupational Information Coordinating Committee.

Iowa occupational employment are also derived from the Occupational Employment Statistics (OES) Survey which the Department of Employment Services conducts in cooperation with the United States Bureau of Labor Statistics. Additionally, information can be obtained from Job Service of Iowa.

In most cases, a local labor market assessment is conducted specifically for determining the immediate and projected employment need for graduates in the program's occupational field. These surveys collect the following types of information:

- Demographic information about the employer, including size, location, products or services provided, number of employees;

- Immediate and projected full- and part-time openings in the occupational field;

- Required and preferred minimum education for entry-level employees;

- Required and preferred work experience of new employees;

- Wage/salary for entry-level employees in the occupation;

- Required entry-level knowledge and skills of entry-level employees;

- Continuing education needs of current employees;

- Preferred format for education and retraining of current employees.

The labor market information is provided to both the Faculty Self-Study Team and to the Internal Review Team.

CHAPTER V

FACULTY SELF-STUDY

The Faculty Self-Study Team utilizes the Program Descriptive Information in the completion of its self-study report. The responses to the attached questions are provided in writing and submitted to the District Office of Academic Affairs and Planning.

FACULTY SELF-STUDY
REPORT FORM

The following questions provide an outline for the Faculty Self-Study. Please answer these questions on separate sheets of paper.

Date _____

Program/Curriculum _____

Certificate _____ Diploma _____ Degree _____

Length of Program/Curriculum _____ Semester(s) _____ Summer Session(s)

Department Chair _____

Self-Study Coordinator: _____

Other Self-Study Team Members _____

_____

1. Discuss the history of the Program/Curriculum. Provide the date of the program's initial implementation. Was it an offshoot of an existing program? When were the last major revisions of the program made? State the nature of these revisions. Discuss any institutional changes and/or external factors that have impacted enrollment, curriculum, job placement, etc. in the program.

2. State the Program/Curriculum philosophy.

3. List the Program/Curriculum Goals and Objectives.

4. List the Program's student outcomes/competencies.

5. Describe the degree to which the program meets the minimum state competencies for this occupational/program area. Cite any discrepancies.

6. Describe any requirements for admission into the Program/Curriculum (specific entry level skills and knowledge, tests, etc.).

7. Is the Program/Curriculum accredited or approved by an external agency? State the name of the accrediting agency, date accreditation was awarded, and the term of accreditation.

8. Describe the methods of instruction utilized.

9. How does the Program/Curriculum utilize counseling and academic advising?

10. Academic advising: What is the ratio of advisees per advisor?

11. Describe how the curriculum reflects "state-of-the-art" and the efforts utilized by faculty to keep the curriculum relevant?

12. Course Development

List the courses offered within the program.

Course No.	Course Title	Last Term Offered	Year Revised	Methods(s) utilized in course revision (i.e. DACUM, Task Analysis, Advisory Comm., etc.)

13. The Self-Study Team has been sent a copy of all Course Development Models (CDMs) approved and on file in the District Office of Academic Affairs and Planning. Review each CDM to assure that it accurately reflects what is taught in the course and that it is written in competency-based format. Note discrepancies between the CDMs and what is taught in the classroom. Indicate the degree to which the CDMs detail knowledge and skill outcomes for students. Also indicate the degree to which the CDMs identify any prerequisite knowledge and skills for each course.

14. Articulation Agreements: Programs as well as specific courses may be articulated with high schools, other community colleges, and 4-year colleges and universities. List the institutions and their location with whom articulation agreements are in effect, and explain the nature of each agreement.

    High Schools: _____

    Community Colleges: _____

    Four-Year Colleges & Universities: _____

15. Discuss any arrangements with business and industry which enhance the Program/Curriculum.

16. Equipment

    A. Describe the type of equipment and materials utilized in the program's instruction.

    B. Are equipment and materials up-to-date? Explain.

    C. Describe the means by which the equipment is maintained.

    D. Detail the equipment costs for each of the past three years. (i.e., equipment acquisition and maintenance and repair).

	1988-89	1989-90	1990-91
Equipment & Acquisition			
Maintenance & Repair			

E. Project costs for the maintenance and repair of existing equipment for each of the next three years.

1991-92

1992-93

1993-94

F. Project the program's/curriculum's need for new equipment and required materials, including costs. List these items in priority order.

Immediate Need

Number of Items	Description	Unit Cost	Total Cost

Equipment and Materials Needed for the Next Two Fiscal Years

Number of Items	Description	Unit Cost	Total Cost

17. Facilities

A. Describe floor space used exclusively by the Program/Curriculum. Include: Laboratory sq. feet

Classroom(s) sq. feet

Office space sq. feet

B. Is the space allotted sufficient? Explain.

18. Advisory Committee

A. Number of members ____.

B. Number of meetings last year ____.

C. List all current members of the Advisory Committee their affiliation, and their initial date of appointment.

D. Explain the extent of the Advisory Committee's involvement in the program.

E. List any recommendations of the Advisory Committee that have been made within the past two years that:

1) The program has been able to respond to.

2) The program has not been able to implement.

F. Attach a copy of the Advisory Committee minutes from meetings held for the past two years and the current year.

19. Professional Development of faculty. List all faculty and designate full- and part-time status. Indicate degrees and certification for each faculty member. Provide the professional development activities for each faculty member over the last two years.

Faculty (F.T.) (P.T.)	Certification/ Degrees	Staff Development Activities Year	Year

20. Student Achievement: For the past two years, indicate the number of graduates who have taken a certification or licensure exam, the number passing, and the mean score if available.

Title of Exam	Number Taking	Number Who Passed	Mean Score

21. Describe the national, regional, and local employment outlook and trends in the occupational field; or the trend of transferability to senior institutions, in the area the Program/Curriculum is preparing students. Include changes occurring in the technology and occupation in general. List sources of information.

22. Describe the unique characteristics of the Program/Curriculum.

23. Project the future trends of the Program/Curriculum.

24. List the Program/Curriculum strengths separately, in order of importance.

25. List the major weaknesses/concerns of the Program/Curriculum separately and in order of importance. Cite the reason(s) for the weaknesses/concerns and include a description of how each weakness/concern could be addressed, providing specific recommendations where possible.

CHAPTER VI

INTERNAL REVIEW TEAM

Purpose The primary purpose of the Internal Review Team is to validate the Faculty Self-Study, to provide consultant assistance, and to formulate recommendations regarding program improvement.

Internal Review Team Members

The Internal Review Team is comprised of at least four EICCD faculty members and administrators appointed by the District Instructional Council:

1. One member of the District Instructional Council;
2. One instructional administrator;
3. One vocational-technical faculty member;
4. One arts and science faculty member.

Role of the Internal Review Team The Internal Review Team reviews all documents, conducts an on-site visit to the program, and compiles a report of their findings and recommendations. This report is submitted to the District Office of Academic Affairs and Planning. It is then forwarded to the Faculty Self-Study Team and the appropriate dean(s). If appropriate, the Faculty Self-Study Team may provide a written response to the Internal Review Team Report.

INTERNAL REVIEW TEAM DUTIES

A program's evaluation involves the visitation, observation and analysis of a Program/Curriculum by an Internal Review Team with the purpose of validating the Faculty Self-Study and providing recommendations for improvement.

DUTIES OF A TEAM MEMBER

Pre-visit Responsibilities:

1. Study all survey and assessment reports, including labor market information, provided by the District Office of Academic Affairs and Planning.

2. Study the five-year trend analysis of program discrete data.

3. Study the Self-Study Report prepared by the faculty.

4. Study the Department of Education approved program and the Course Development Models of the Program/Curriculum.

5. Become familiar with the team evaluation form used to compile the findings, conclusions, and recommendations of the Internal Review Team.

6. Identify specific questions to be asked of the faculty, students, and program administrators in order to clarify program concerns and to validate the recommendations and conclusions contained in the faculty's self-study.

7. Schedule the on-site visit to the program, including the development of an agenda which includes a tour of the classrooms and laboratories, examination of instructional materials, meeting with students, faculty and program administrators.

Visit Responsibilities:

1. Meet with the Program/Curriculum faculty, its administrators, and students enrolled in the program.

2. Examine Program/Curriculum philosophy, goals, objectives, curriculum, reports, Advisory Committee and department meeting minutes, student handbooks, etc.

3. Examine teaching materials, supplies and equipment presently being used in the program.

4. Tour the classrooms and laboratories used by the program.

5. Make an effort to contact all faculty members and as many students as possible.

6. Record comments and observations on team evaluation form.

Post-visit Responsibilities:

1. Prepare summary of findings and recommendations.

2. Prepare and submit responses to the team evaluation form to the District Office of Academic Affairs and Planning.

INTERNAL REVIEW TEAM REPORT FORM

For each of the following questions, check the appropriate response and provide a rationale or explanation for your response in the space provided.

Date _____

Title of the Program _____

College Location _____

Internal Review Team Chair _____

Other Internal Review Team Members _____

_____

_____

Instruction

Yes ____ 1. Is the Philosophy of the program consistent with the
No ____ Mission and Philosophy of the District?

Yes ____ 2. Are Program/Curriculum goals and objectives available and
No ____ are they stated in measurable terms?

Yes ____ 3. Are student outcomes defined? Describe how student
No ____ attainment of the stated performance outcomes are measured?

Yes ____ 4. Does the program meet the minimum state competencies for
No ____ this occupational/program area? If no, please cite discrepancies.

Yes ____
No ____

5. Are Program/Curriculum goals and objectives consistent with validated entry-level occupation competencies and occupational/ educational standards? If no, identify those needing change.

Yes ____
No ____

6. Are written objectives for individual courses stated in measurable terms? If no, identify those needing change.

Yes ____
No ____

7. Are written objectives made available to students?

Yes ____
No ____

8. Are Program/Curriculum prerequisite knowledge and skills clearly and concisely defined to facilitate student success in the program?

Yes ____
No ____

9. Are Program/Curriculum requirements for admission realistic and fairly applied?

Yes ____
No ____

10. Is the Program/Curriculum accredited or approved by an external agency? If yes, by whom and what is the length of approval/accreditation?

Yes ____
No ____

11. Do the courses and their sequence accommodate part-time and non-traditional students?

Yes ____ 12. Are Course Development Models complete and up-to-date? If
No ____ no, list those models that are outdated or not completed.

Yes ____ 13. Are various and appropriate methods of instruction
No ____ utilized? If no, identify those needed.

Yes ____ 14. Is there sufficient quantity of instructional materials
No ____ available to students? If no, identify those needed.

Yes ____ 15. Are printed materials up-to-date? If no, identify those
No ____ that are outdated.

Yes ____ 16. Is sex or racial bias eliminated in the instructional
No ____ material? If no, identify specific material(s) that
is/are slanted toward a particular sex or race?

Yes ____ 17. Is there sufficient quantity of audiovisual instructional
No ____ materials available? If no, identify those needed.

Yes ____ 18. Are the audiovisuals up-to-date? If no, identify those
No ____ that need updating.

Yes ____ 19. Does the Program/Curriculum adequately utilize counseling
No ____ and academic advising? If no, identify reasons.

Yes ____ 20. Are provisions made within the Program/Curriculum to work
No ____ with special needs students such as the academically disadvantaged and handicapped students? If no, identify needed modification.

Yes ____ 21. Does the curriculum reflect the "state-of-the-art"? If
No ____ not, identify needed changes.

Yes ____ 22. Are courses reviewed and revised on a regular basis by a
No ____ specific evaluation method? If not, identify needed change.

Yes ____ 23. Are there articulation agreements with other institutions?
No ____ If no, should there be?

Yes ____ 24. Are there arrangements with business and industry which
No ____ enhance the Program/Curriculum?

Yes ____ 25. Are the graduates and leavers of the program successful
No ____ once they enter the job market/transfer?

26. Is the employment picture in the occupational/program field healthy?

Yes ____ Locally
No ____

Yes ____ Regionally or Nationally
No ____

Yes ____ 27. Is the program cost effective?
No ____

Equipment

Yes ____ 28. Is the equipment in this program modern and current
No ____ according to the standards of business and industry or education? If no, identify that which is out-of-date.

Yes ____ 29. Is sufficient equipment available for student use? If no,
No ____ identify specific equipment where additional quantities are needed for student use.

Yes ____ 30. Is the equipment in this program in proper operating
No ____ condition? If no, identify that which needs repair.

Yes ____ 31. Is the equipment listed in the Faculty Self-Study Report
No ____ (Item 15F) needed? If no, please indicate which items are not needed.

Yes ____ 32. Is an adequate maintenance plan used with the equipment?
No ____ If no, suggest ways for improvement.

Yes ____ 33. Is available equipment sufficient to meet new and emerging
No ____ trends in business and industry or education? If no, identify new equipment needed.

Supplies

Yes ____ 34. Are currently needed supplies on hand or readily
No ____ accessible? If no, identify those needed.

Yes ____ 35. Are supplies in sufficient quantity to meet student needs?
No ____ If no, identify needed supplies.

Advisory Committee

Yes ____ 36. Does the Advisory Committee provide input on course
No ____ content, program modification, instructional materials and equipment, student employability and placement?

Budget

Yes ____ 37. Is the operational budget for the Program/Curriculum
No ____ planned with instructor input? If no, who plans the budget?

Yes ____ 38. Is the budget adequate for achieving Program/Curriculum
No ____ objectives? If no, specify the budget needed.

Yes ____ 39. Are instructors in the program provided the staff
No ____ development and continuing education opportunities to keep up-to-date in their instructional areas?

Physical Facilities

To have effective instruction, the physical facilities must meet the needs of the Program/Curriculum and students. Please rate the following:

E = Excellent - needs no improvement
A = Adequate - needs slight improvement
I = Inadequate - needs definite improvement
NA = Not Applicable

1.	Size of the classroom(s).	E	A	I	NA
2.	Size of the laboratory area(s).	E	A	I	NA
3.	The lighting in the classroom(s).	E	A	I	NA
4.	The lighting in the laboratory area(s).	E	A	I	NA
5.	Proper heating/cooling of the classroom(s).	E	A	I	NA
6.	Proper heating/cooling of the laboratory(s).	E	A	I	NA
7.	The noise level of the classroom.	E	A	I	NA
8.	The noise level of the laboratory.	E	A	I	NA
9.	Safety conditions in the classroom(s).	E	A	I	NA
10.	Safety conditions in the laboratory area(s).	E	A	I	NA
11.	Gas supply, if needed for instruction.	E	A	I	NA
12.	Water supply, if needed for instruction.	E	A	I	NA
13.	Electrical service available.	E	A	I	NA
14.	Proper storage facilities.	E	A	I	NA
15.	Housekeeping - neatness and organization.	E	A	I	NA
16.	Walking/working space available for free and unobstructed movement in the area(s).	E	A	I	NA

Comments:

SUMMARY & CONCLUSIONS

1. List the major strengths of the Program/Curriculum separately, in order of importance.

2. List the major concerns of the program separately, in order of importance, with annotations on the causes of concerns.

3. What are the major factors influencing the continued success of the program (both internal and external to the program)?

4. List recommendations for improvement separately, in order of importance. Provide a rationale for each recommendation and include the resources necessary to implement each recommendation.

CHAPTER VII

THE FACULTY RESPONSE TO THE INTERNAL REVIEW TEAM REPORT

The Internal Review Team Report is forwarded by the District Office of Academic Affairs and Planning to the Faculty Self-Study Team for their review. The program faculty are provided the opportunity to respond to any of the responses and recommendations presented in the report. This is especially important if there are discrepancies in the conclusions or recommendations of the two groups.

The Faculty Response to the Internal Review Team report must be submitted in writing to the District Office of Academic Affairs and Planning by the date specified. This response, if any, is included in the Program Evaluation Report, and reviewed by the Instructional Council and College Presidents in the decision making process.

CHAPTER VIII

DECISION MAKING BY INSTRUCTIONAL COUNCIL

Program Evaluation Reports are compiled by the District Office of Academic Affairs and Planning. These reports are divided into eight chapters.

1. Program Descriptive Data;
2. The Course Development Models;
3. Program Evaluation Survey Results;
4. The Labor Market Assessment Results;
5. Faculty Self-Study;
6. The Internal Review Team Report;
7. The Faculty Response to the Internal Review Team Report;
8. Plan of Actions.

It is the task of the Instructional Council in concert with the College Presidents to determine the Plan of Actions to be taken in each program as a result of the Program Evaluation. The Instructional Council will thoroughly examine all recommendations, noting any discrepancies which may have arisen between the Faculty Self-Study Report and the Internal Review Team Report. The Plan of Actions determined by the Instructional Council will cut across all aspects of the program, and may include curriculum revision, staff development for faculty, the acquisition of new equipment, the updating of instructional materials, conducting further research or study, etc. The Plan of Actions will indicate the specific time line by which the activities will be accomplished.

The Plan of Actions will be reviewed by the Chancellor, and submitted in writing to the faculty for their implementation by the District Instructional Council.